



12.28.04

IFW to

CED 6007.1  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of Kenneth B. Gilleo  
Serial No. 10/669,901  
Filed September 24, 2003  
Confirmation No. 8156  
For PACKAGE FOR MICROCHIPS

Art Unit 2815

December 27, 2004

COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VIRGINIA 22313-1450

SIR:

**FIRST SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

In accordance with 37 C.F.R. 1.97 and 1.98 and MPEP 609, and in compliance with the duty of disclosure set forth in 37 C.F.R.

\* 1.56, applicant submits the attached PTO/SB/08A for consideration by the Patent and Trademark Office in the above-entitled application and to be made of record therein.

\* Applicant submits herewith a copy of the Provisional Application No. 60/390,011.

\* A check in the amount of \$180.00 is enclosed to cover the fee specified in 37 CFR §1.17(p) for submission of this Information Disclosure Statement.

Respectfully submitted,

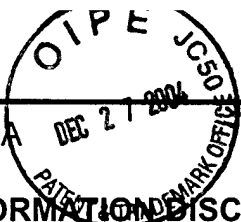
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<b>PTO/SB/08A</b> <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> (use as many sheets as necessary)				<b>Complete if Known</b>	
				Application Number	10/669,901
				Filing Date	September 24, 2003
				Confirmation Number	8156
				First Named Inventor	Kenneth B. Gilleo
				Group Art Unit	2815
				Examiner Name	Jasmine Clark
Sheet	1	of	1	Attorney Docket No.	CED 6007.1

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY
		Number	Kind Code <sup>2</sup> (if known)		
	17	60/390,011		Farrell et al.	06-19-2002

Examiner Signature	Date Considered
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Unique citation designation number. <sup>2</sup>See attached Kinds of U.S. Patent Documents. <sup>3</sup>Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup>For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup>Applicant is to place a check mark here if English language Translation is attached or place an "A" here if English language abstract is attached..

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

**FEE TRANSMITTAL**

Application Number 10/669,901  
Filing Date September 24, 2003  
Inventor(s) Kenneth B. Gilleo  
Examiner Name Jasmine Clark  
Attorney Docket Number CED 6007.1

Art Unit 2815  
Confirmation No. 8156



**METHOD OF PAYMENT**

- ☐ The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.
- ☒ Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

**FEE CALCULATION**

1. ☐ BASIC FILING, SEARCH AND EXAMINATION FEES  
(Type: \_\_\_\_\_) Subtotal (1) \$ \_\_\_\_\_

2. ☐ EXCESS CLAIM FEES

Total Claims \_\_\_\_ - \_\_\_\_ (HP) = \_\_\_\_ x Fee \_\_\_\_ = \$ \_\_\_\_\_  
Indep Claims \_\_\_\_ - \_\_\_\_ (HP) = \_\_\_\_ x Fee \_\_\_\_ = \$ \_\_\_\_\_  
Multiple Dependent Claims Fee \_\_\_\_\_ \$ \_\_\_\_\_

(HP = highest number of claims paid for)

Subtotal (2) \$ \_\_\_\_\_

3. ☐ APPLICATION SIZE FEE

Total Pages \_\_\_\_ - 100 = \_\_\_\_ ÷ 50 = \_\_\_\_ x \$250 = \$ \_\_\_\_\_  
(Application + Drawings) (round up to whole #)

Subtotal (3) \$ \_\_\_\_\_

4. ☒ OTHER FEE(S)

- ☒ one (1) month extension of time  
☐ Information disclosure statement  
☐ 37 CFR 1.17(q) processing fee  
☐ Non-English specification  
☐ Notice of Appeal  
☐ Filing a brief in support of appeal  
☐ Request for oral hearing  
☐ Other: \_\_\_\_\_

Subtotal (4) \$ 120.00

**TOTAL AMOUNT OF PAYMENT** \$ 120.00

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12/27/04  
Date

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